

# Focus On...

*Information about your Health from the Directorate of Primary Care Services, Ft. Gordon, Georgia*

## Costochondritis

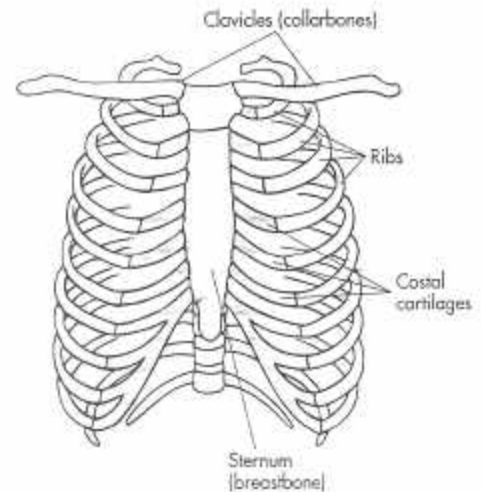
Maria Richard, PA-C

### What is costochondritis?

Costochondritis is anterior chest wall pain caused by an irritated joint between the rib and the sternum (breastbone).

### What are the symptoms?

- pain, usually sharp in nature, which worsens with deep breaths
- pain in the area of one or many joints alongside the sternum
- recurrent pain which worsens after physical exercise, such as push-ups



### What causes costochondritis?

Costochondritis is most common in younger adults who lead active lives and generally results from inflammation of the joint cartilage between the ribs and the sternum. This inflammation may result from a recent upper respiratory infection, coughing, unusually stressful physical exercise, or trauma. It may also occur without any apparent reason.

### What is the treatment for costochondritis?

First of all, if the cause for the inflammation is known, efforts should be made to reduce or eliminate it. For example, if wearing a ruck sack worsens the pain, you may have to avoid wearing it for a few days to allow the joint to recover. Aggressive preparation for a PT test may cause costochondritis, and it would be a good idea to rest the upper torso for a few days to allow the inflammation to resolve a bit.

Women should consider wearing a supportive bra for comfort.

Next, medications aimed at reducing the inflammatory reaction may be used. Non-steroidal anti-inflammatory drugs (NSAID's, for short) such as aspirin, ibuprofen (Motrin™), indomethacin and Naproxen™ are usually effective. It is important to remember that these medications take a few days to begin to work, and will only continue to work if they are taken in their prescribed doses.

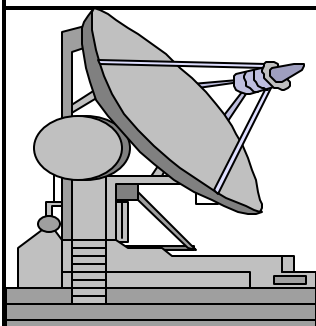
Cool compresses can also be of some benefit in reducing symptoms.

### For what reasons should I follow-up, call the clinic, etc.?

Improvement with proper therapy should be noticeable within a week. Resolution of the symptoms, assuming the aggravating cause has been addressed, should occur within 2-4 weeks.

(Continued on reverse...)

If your symptoms persist beyond a month, despite adequate therapy, you should make an appointment to come back for re-evaluation.



This Patient Information Handout is produced by the Directorate of Primary Care Services, Dwight D. Eisenhower Army Medical Center, Ft. Gordon, GA.

Information is current and correct at the time of the last revision. This information sheet is not intended to replace an evaluation by a competent medical provider, but rather to supplement the treatment plan outlined by the patient's health care provider. Moreover, much of the information is intended to be of a general nature and it cannot be assumed that such information will necessarily apply to specific individuals. Opinions and facts do not necessarily reflect that of the United States Government or its subordinate agencies.

Questions, comments and corrections should be forwarded to:

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## The Directorate of Primary Care Services

	<u>Hours</u>	<u>Appointments</u>	<u>Messages</u>
Connelly Signal Health Clinic	0600-1600*	787-7300	787-7360
Signal Health Care Clinic #4 (TMC #4)	0600-1600*	787-7300	787-7360
Main Family Practice Clinic	0600-2030	787-7300	787-7360
Internal Medicine Clinic	0800-1600*	787-7300	787-7360
Primary Care Clinic	0800-1600*	787-7300	787-7360

Medication Renewals 787-7360

Pharmacy Direct Refills 787-1710

<b>Emergency Dept. Advice Line</b>	787-5222/6727
<b>Poison Control</b>	1-800-282-5846
<b>Outpatient Pharmacy</b>	787-7010
<b>Labor and Deliver @ MCG</b>	721-2687
<b>Emergency</b>	dial 911
<b>Information Desk @ EAMC</b>	787-5811/4568
<b>TriCare Information Hotline</b>	1-800-333-5331

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*Extended Hours Clinic is held at the Main FP Clinic, and is available for all the soldiers, retirees, and family members seen at any of the Directorate of Primary Care Clinics.*